FEC

STATEMENT OF

| FORM 1 | ORGANIZ | ATION | | |
|-------------------------------|---|--|-------------------|---------------------------------|
| 1 011111 1 | (See instruction | ons) | | Office use only |
| NAME OF COMMITTEE (in f | (Check if name is changed) | Example: If typying, typ over the lines | e 12FE4M5 | 1 1 |
| Norfolk Southe | ern Corporation Good Governm | ent Fund | | |
| | | | | |
| ADDRESS (number and s | treet) 3 Commercial Place | • | | |
| (Check if address is changed) | | | 111111 | |
| | Norfolk | | L VA | 23510 |
| | | CITY▲ | STATE▲ | ZIP CODE ▲ |
| COMMITTEE'S E-MAIL | ADDRESS (Please provide only one e | | | |
| (Check if address is changed) | stacey.parker@nsc | orp.com | | |
| | | | | |
| COMMITTEE'S WEB F | PAGE ADDRESS (URL) | | | |
| (Check if address is changed) | | | | |
| | | | | |
| 2. DATE 0.3 | / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | - | |
| 3. FEC IDENTIFICAT | TION NUMBER | C C00009282 | | |
| 4. IS THIS STATEM | ENT NEW (N) OR | X AMENDED (| A) | |
| I certify that I have examin | ned this Statement and to the best of my kn | owledge and belief it is true. cor | rect and complete | |
| , | | _ | · | |
| Type or Print Name of 1 | reasurer Marque Ledoux | | | |
| Signature of Treasurer | Electronically Filed by Marque L | .edoux | _ Date 0.3 | 19 / 2009 |
| NOTE: Submission of fals | se, erroneous, or incomplete information ma | | | |
| Office Use Only | | For further inform Federal Election Co Toll Free 800-424-9 | ommission | FEC FORM 1 (Revised 02/2009) |